

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 1086742
APPLICANT(S)

FILED DATE 02-25-01

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS
	IND	DEP	IND	DEP	IND	DEP	
1	/		/				
2		/		/			
3		/		/			
4		/		/			
5		/		/			
6		/		/			
7		/		/			
8		/		/			
9		/		/			
10		/		/			
11		/		/			
12		/		/			
13		/		/			
14		/		/			
15		2		2			
16		2		2			
17		2		2			
18		2		2			
19		/		/			
20	/		/				
21		/		/			
22		/		/			
23		0		/			
24	/		/				
25		/		/			
26		/		/			
27		0		/			
28	/		/				
29		/		/			
30		/		/			
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48		/		/			
49		/		/			
50		/		/			
TOTAL IND.	9		9				
TOTAL DEP.	45		45				
TOTAL CLAIMS	54		54				

51						
52						
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TOTAL DEP.						
TOTAL CLAIMS						